

FORM B5
(10-05)

United States Bankruptcy Court		INVOLUNTARY PETITION													
<u>Southern District of Ohio</u>															
IN RE (Name of Debtor – If individual: Last, First, Middle) Claddagh Development Group, LLC		ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.)													
LAST FOUR DIGITS OF SOC. SEC. NO./Complete EIN or other TAX I.D. NO. (If more than one, state all.). 30-0003884															
STREET ADDRESS OF DEBTOR (No. and street, city, state and zip code) 29500 Aurora Road, Suite 10 Solon, Ohio 44139		MAILING ADDRESS OF DEBTOR (If different from street address)													
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS (Debtor has place of business located in Warren County, Ohio)		ZIP CODE 45040	ZIP CODE												
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses) (Debtor has a location of assets located at 5075 Deerfield Blvd., Mason, Warren County, Ohio 45040)															
CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED <input type="checkbox"/> Chapter 7 <input checked="" type="checkbox"/> Chapter 11															
<div style="text-align: center;">INFORMATION REGARDING DEBTOR (Check applicable boxes)</div> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> Petitioners believe: <input type="checkbox"/> Debts are primarily consumer debts <input checked="" type="checkbox"/> Debts are primarily business data </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> <div style="text-align: center;">TYPE OF DEBTOR</div> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Individual</td> <td><input type="checkbox"/> Stockbroker</td> </tr> <tr> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Railroad</td> </tr> <tr> <td><input checked="" type="checkbox"/> Corporation</td> <td><input type="checkbox"/> Health Care Business</td> </tr> <tr> <td><input type="checkbox"/> Clearing Bank</td> <td><input type="checkbox"/> Commodity Broker</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> <td></td> </tr> </table> </td> </tr> </table>				Petitioners believe: <input type="checkbox"/> Debts are primarily consumer debts <input checked="" type="checkbox"/> Debts are primarily business data	<div style="text-align: center;">TYPE OF DEBTOR</div> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Individual</td> <td><input type="checkbox"/> Stockbroker</td> </tr> <tr> <td><input type="checkbox"/> Partnership</td> <td><input type="checkbox"/> Railroad</td> </tr> <tr> <td><input checked="" type="checkbox"/> Corporation</td> <td><input type="checkbox"/> Health Care Business</td> </tr> <tr> <td><input type="checkbox"/> Clearing Bank</td> <td><input type="checkbox"/> Commodity Broker</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> <td></td> </tr> </table>	<input type="checkbox"/> Individual	<input type="checkbox"/> Stockbroker	<input type="checkbox"/> Partnership	<input type="checkbox"/> Railroad	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Health Care Business	<input type="checkbox"/> Clearing Bank	<input type="checkbox"/> Commodity Broker	<input type="checkbox"/> Other _____	
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<input type="checkbox"/> Other _____															
BRIEFLY DESCRIBE NATURE OF BUSINESS Retail															
<div style="text-align: center;">VENUE</div> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> A bankruptcy case concerning debtor's affiliate, general partner or partnership is pending in this District.		<div style="text-align: center;">FILING FEE (Check one box)</div> <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Petitioner is a child support creditor or its representative, and the form specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached.													
PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional case on attached sheets)															
Name of Debtor		Case Number													
Relationship		Date													
District															
<div style="text-align: center;">ALLEGATIONS (Check applicable boxes)</div> <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> Petitioner(s) are eligible to file this petition pursuant to 11 U.S.C. § 303(b). 2. <input checked="" type="checkbox"/> The debtor is a person against whom an order for relief may be entered under title 11 of the United States Code. 3. a. <input checked="" type="checkbox"/> The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount; <div style="text-align: center;">or</div> b. <input type="checkbox"/> Within 120 days preceding the filing of this petition, a custodian, other than a trustee, receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession. 		COURT USE ONLY													

If a child support creditor or its representative is a petitioner, and if the petitioner files the form specified in § 304(g) of the Bankruptcy Reform Act of 1994, no fee is required

Name of Debtor Claddagh Development Group, LLC

OFFICIAL FORM 5 – Page 2
Involuntary Petition
(10-05)

Case No. _____

TRANSFER OF CLAIM

☐ Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X /s/Michael J. Gallagher
Signature of Petitioner or Representative (State title)
The John F. Gallagher Company 10/12/06
Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity: Michael J. Gallagher, P.E., President, 36360 Lakeland Blvd., Willoughby, OH 44094

X /s/Richard L. Ferrell 10/23/06
Signature of Attorney Date
Taft, Stettinius & Hollister, LLP
Name of Attorney Firm (if any)
425 Walnut Street, Suite 1800 Cincinnati, Ohio 45202
Address
Richard L. Ferrell (513) 381-2838
Name & Telephone No.

X _____
Signature of Petitioner or Representative (State title)

Name of Petitioner Date Signed
Name & Mailing
Address of Individual _____
Signing in Representative _____
Capacity _____

X _____
Signature of Attorney Date

Name of Attorney Firm (if any)

Address

Name & Telephone No.

X _____
Signature of Petitioner or Representative (State title)

Name of Petitioner Date Signed
Name & Mailing
Address of Individual _____
Signing in Representative _____
Capacity _____

X _____
Signature of Attorney Date

Name of Attorney Firm (if any)

Address

Name & Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner <u>The John F. Gallagher Company</u>	Nature of Claim: <u>unpaid services and materials provided to the Debtor.</u>	Amount of Claim <u>In excess of \$1,600.</u>
Name and Address of Petitioner <u>Queensgate Food Group, LLC, dba Queensgate Foodservice</u>	Nature of Claim: <u>unpaid goods sold and delivered to the Debtor.</u>	<u>\$99,633.27, plus pre-petition interest and attorneys' fees</u>
Name and Address of Petitioner <u>Economy Linens, Inc., 80 Mead Street Dayton, Ohio 45402</u>	Nature of Claim <u>Unpaid goods provided to the Debtor and balanced owed on service contract with Debtor.</u>	Amount of Claim <u>In excess of \$30,000.</u>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims <u>In excess of \$</u>

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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X /s/ J. Mark Mullen, CFO
 Signature of Petitioner or Representative (State title)
Queensgate Food Group, LLC, dba Queensgate Foodservice,
10/13/06
 Name of Petitioner Date Signed
 Name & Mailing
 Address of Individual
 Signing in Representative
 Capacity: J. Mark Mullen, Chief Financial Officer, 619 Linn Street,
Cincinnati, OH 45203

X /s/Douglas L. Lutz 10/13/06
 Signature of Attorney Date
Frost Brown Todd, LLC
 Name of Attorney Firm (if any)
201 E. Fifth Street, Suite 201, Cincinnati, OH 45202
 Address
Douglas Lutz (513) 651-6724
 Name & Telephone No.

X _____
 Signature of Petitioner or Representative (State title)

 Name of Petitioner Date Signed
 Name & Mailing
 Address of Individual _____
 Signing in Representative _____
 Capacity _____

X _____
 Signature of Attorney Date

 Name of Attorney Firm (if any)

 Address _____
 Telephone No. _____ Name &

X _____
 Signature of Petitioner or Representative (State title)

 Name of Petitioner Date Signed
 Name & Mailing
 Address of Individual _____
 Signing in Representative _____
 Capacity _____

X _____
 Signature of Attorney Date

 Name of Attorney Firm (if any)

 Address _____
 Telephone No. _____ Name &

PETITIONING CREDITORS

Name and Address of Petitioner The John F. Gallagher Company	Nature of Claim: unpaid services and materials provided to the Debtor.	Amount of Claim In excess of \$1,600.
Name and Address of Petitioner Queensgate Food Group, LLC, dba Queensgate Foodservice	Nature of Claim: unpaid goods sold and delivered to the Debtor.	\$99,633.27, plus pre-petition interest and attorneys' fees
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Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims In excess of \$130,000

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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X /s/Bruce R. Feldman, President
 Signature of Petitioner or Representative (State title)
Economy Linen, Inc. 10/23/06
 Name of Petitioner Date Signed
 Name & Mailing
 Address of Individual
 Signing in Representative
 Capacity Bruce R. Feldman, President, Economy Linen, Inc. 80
Mead St., Dayton, OH 45402

X /s/ Mark Foster 10/23/06
 Signature of Attorney Date
Mark Foster
 Name of Attorney Firm (if any)
4428 N. Dixie Drive, Dayton, Ohio 45414
 Address
Mark Foster, (937) 278-0651
 Name & Telephone No.

X _____
 Signature of Petitioner or Representative (State title)

 Name of Petitioner Date Signed
 Name & Mailing
 Address of Individual _____
 Signing in Representative _____
 Capacity _____

X _____
 Signature of Attorney Date

 Name of Attorney Firm (if any)

 Address
 _____ Name &
 Telephone No.

X _____
 Signature of Petitioner or Representative (State title)

 Name of Petitioner Date Signed
 Name & Mailing
 Address of Individual _____
 Signing in Representative _____
 Capacity _____

X _____
 Signature of Attorney Date

 Name of Attorney Firm (if any)

 Address
 _____ Name &
 Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner The John F. Gallagher Company	Nature of Claim: unpaid services and materials provided to the Debtor.	Amount of Claim In excess of \$1,600.
Name and Address of Petitioner Queensgate Food Group, LLC, dba Queensgate Foodservice	Nature of Claim: unpaid goods sold and delivered to the Debtor.	\$99,633.27, plus pre-petition interest and attorneys' fees
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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X /s/Robert M. Duffy
 Signature of Petitioner or Representative (State title)
Great Lakes Concrete Restoration, Inc. 10/24/06
 Name of Petitioner Date Signed

Name & Mailing
 Address of Individual
 Signing in Representative
 Capacity Robert Duffey, Vice President, 1000 Monroe Street,
Toledo, OH 43604

X /s/Richard L. Ferrell 10/25/06
 Signature of Attorney Date
Taft, Stettinius & Hollister, LLP
 Name of Attorney Firm (if any)
425 Walnut Street, Suite 1800 Cincinnati, Ohio 45202
 Address
Richard L. Ferrell (513) 381-2838
 Name & Telephone No.

X _____
 Signature of Petitioner or Representative (State title)

 Name of Petitioner Date Signed

 Name & Mailing
 Address of Individual _____
 Signing in Representative _____
 Capacity _____

X _____
 Signature of Attorney Date

 Name of Attorney Firm (if any)

 Address _____
 _____ Name &
 Telephone No.

X _____
 Signature of Petitioner or Representative (State title)

 Name of Petitioner Date Signed

 Name & Mailing
 Address of Individual _____
 Signing in Representative _____
 Capacity _____

X _____
 Signature of Attorney Date

 Name of Attorney Firm (if any)

 Address _____
 _____ Name &
 Telephone No.

PETITIONING CREDITORS

Name and Address of Petitioner <u>Great Lakes Concrete Restoration, Inc.</u>	Nature of Claim: <u>unpaid services and materials provided to the Debtor.</u>	Amount of Claim <u>In excess of \$2,000.</u>
Name and Address of Petitioner	Nature of Claim:	
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims